Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF NEW YORK		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this is an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself			
			About Debtor 1:	A	bout Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name			
		e the name that is on	Marcia		
	pictu exar	government-issued ure identification (for nple, your driver's	First name	F	irst name
	licer	ise or passport).	Middle name	IV	liddle name
	Brin	g your picture	Grostein		
		tification to your ting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Li	ast name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years			
	maio assu	de your married or den names and any imed, trade names and g business as names.			
	any such parti	NOT list the name of separate legal entity n as a corporation, nership, or LLC that is illing this petition.			
3.	you num Indi	y the last 4 digits of r Social Security liber or federal vidual Taxpayer litification number	xxx-xx-1700		

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Your Employer Identification Number (EIN), if any.	EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		25 East 69th Street, #5b New York, NY 10021 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		New York County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Der	Marcia Grostein					Case number (if known)	
Par	Tell the Court About	our Bar	nkruptcy Ca	ase			
7.	The chapter of the Bankruptcy Code you are				of each, see Notice Required by bage 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.	
	choosing to file under	□ Cha	apter 7				
		☐ Cha	apter 11				
		☐ Cha	apter 12				
		■ Cha	apter 13				
8.	How you will pay the fee	a o a	bout how your order. If your ore-printed	ou may pay. Typio attorney is subm address.	cally, if you are paying the fee yo itting your payment on your beha	k with the clerk's office in your local court for more deta urself, you may pay with cash, cashier's check, or mor alf, your attorney may pay with a credit card or check we on, sign and attach the Application for Individuals to Pa	ney ⁄ith
					(Official Form 103A).	in, sign and attach the Application for marriagas to ra	y
		b a	out is not req applies to yo	quired to, waive your family size and	our fee, and may do so only if yo I you are unable to pay the fee ir	n only if you are filing for Chapter 7. By law, a judge ma ur income is less than 150% of the official poverty line n installments). If you choose this option, you must fill o cial Form 103B) and file it with your petition.	that
9.	Have you filed for	■ No.					
	bankruptcy within the last 8 years?	☐ Yes.					
	•		District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	■ No □ Yes.					
	affiliate?		Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your	■ No.	Go to	line 12.			
	residence?	☐ Yes.	Has yo	our landlord obtain	ned an eviction judgment agains	t you?	
				No. Go to line 12	2.		
				Yes. Fill out <i>Initi</i> this bankruptcy		Judgment Against You (Form 101A) and file it as part of	f

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Number, Street, City, State & Zip Code

Where is the property?

#### Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

10/31/23 2:16PM Debtor 1 Marcia Grostein Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10.000 5**0.001-100.000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$500,000,001 - \$1 billion ■ \$1,000,001 - \$10 million estimate your assets to **□** \$50,001 - \$100,000 □ \$1,000,000,001 - \$10 billion □ \$10,000,001 - \$50 million be worth? **\$100,001 - \$500,000** □ \$10,000,000,001 - \$50 billion □ \$50.000.001 - \$100 million □ \$500,001 - \$1 million ☐ More than \$50 billion □ \$100,000,001 - \$500 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$1,000,000,001 - \$10 billion

### Part 7:

For you

to be?

Sign Below

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

□ \$10,000,001 - \$50 million

□ \$50,000,001 - \$100 million

□ \$100,000,001 - \$500 million

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11. United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/	Mar	сіа	Gros	teir

**\$100,001 - \$500,000** 

■ \$500,001 - \$1 million

**Marcia Grostein** Signature of Debtor 1 Signature of Debtor 2

Executed on October 31, 2023

MM / DD / YYYY

Executed on MM / DD / YYYY

□ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Linda Tirelli	Date	October 31, 2023
Signature of Attorney for Debtor		MM / DD / YYYY
Linda Tirelli Esq		
Tirelli Law Group, LLC		
50 Main Street Suite 1265 White Plains, NY 10606		
Number, Street, City, State & ZIP Code		
Contact phone <b>914-732-3222</b>	Email address	LTirelli@tirellilawgroup.com
Bar number & State		

Westcheste Imsford, NY Imber, Street, City, wes the debt? or 1 only or 2 only	10523 State & Zip Code	As of the date you file, the clapply.  ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that ☐ An agreement you made (scar loan)	laim is: Check all that	ured		
Westcheste Imsford, NY Imber, Street, City, wes the debt?	10523 State & Zip Code	As of the date you file, the clapply.  Contingent Unliquidated Disputed Nature of lien. Check all that An agreement you made (s	laim is: Check all that	ured		
Westcheste Imsford, NY	10523 State & Zip Code	As of the date you file, the clapply.  Contingent Unliquidated Disputed	laim is: Check all that			
editor's Name Westcheste Imsford, NY	10523	As of the date you file, the clapply.  Contingent Unliquidated				
editor's Name Westcheste Imsford, NY	10523	As of the date you file, the clapply.  Contingent				
		Real Estate Mortgage				
migrant Mo	rtgage Co	Describe the property that se	ecures the claim:	\$462,000.00	\$1,400,000.00	\$0.00
claim. If more t	han one creditor has	a particular claim, list the other	creditors in Part 2. As	Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecured portion If any
		more than one secured claim list	t the creditor separately	Column A	Column B	Column C
_		below.				
		•	ir other schedules. Yo	u nave notning else t	o report on this form.	
		, , , ,	ur other schedules. Ve	u hava nothing also t	to report on this form	
•						
d, copy the Add						
edule D:	Creditors	Who Have Clai	ms Secured	by Propert	У	12/15
al Form 1	<u>06D</u>					
					ameno	ed filing
					☐ Check	if this is an
ımher						
States Bankru	ptcy Court for the:	SOUTHERN DISTRICT	OF NEW YORK			
f, filing) F	irst Name	Middle Name	Last Name		-	
2						
			Last Name		-	
	States Bankru  States Bankru  Implete and accd, copy the Add  if known).  reditors have  No. Check this  res. Fill in all of  List All Se  Il secured claim. If more to possible, list the	Marcia Grostein First Name  2 first Name  States Bankruptcy Court for the sumber  al Form 106D  edule D: Creditors  mplete and accurate as possible. d, copy the Additional Page, fill it if known).  r creditors have claims secured by No. Check this box and submit the ces. Fill in all of the information  List All Secured Claims  Il secured claims. If a creditor has claim. If more than one creditor has claim. If more than one creditor has claim.	Marcia Grostein  First Name Middle Name  2 A filing)  First Name Middle Name  States Bankruptcy Court for the:  SOUTHERN DISTRICT  SOUTHERN DISTRICT  First Name Middle Name  States Bankruptcy Court for the:  SOUTHERN DISTRICT  First Name Middle Name  SOUTHERN DISTRICT  First Name  First Name  SOUTHERN DISTRICT  FIRST Name  First Name  SOUTHERN DISTRICT  FIRST Name  First Name  SOUTHERN DISTRIC	First Name Middle Name Last Name  States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK  States Bankruptcy  First Name Middle Name Last Name  States Bankruptcy  First Name Middle Name Last Name  Southern DISTRICT OF NEW YORK  Southern DISTRICT OF NEW YORK	Marcia Grostein First Name Middle Name Last Name  Pirst Name Middle Name Last Name  States Bankruptcy Court for the:  SOUTHERN DISTRICT OF NEW YORK  SOUTHERN DISTRICT OF NEW YORK  Source Claims Secured by Propert  Mal Form 106D  Edule D: Creditors Who Have Claims Secured by Propert  Implete and accurate as possible. If two married people are filing together, both are equally responsible for st did, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any addition if known).  It creditors have claims secured by your property?  No. Check this box and submit this form to the court with your other schedules. You have nothing else to great the court of the information below.  List All Secured Claims  It secured claims. If a creditor has more than one secured claim, list the creditor separately claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As possible, list the claims in alphabetical order according to the creditor's name.  Column A  Amount of claim Do not deduct the value of collateral.	Marcia Grostein  First Name Middle Name Last Name  States Bankruptcy Court for the:  SOUTHERN DISTRICT OF NEW YORK  South Bankruptcy Court for the:  Check amend  al Form 106D  Check amend  Check amend

					10/31/23 2:16PM
Fill in th	nis information to identify your o	case:			
Debtor 1	Marcia Grostein				
Dobtor .	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if,	filing) First Name	Middle Name	Last Name		
United S	States Bankruptcy Court for the:	SOUTHERN DIST	TRICT OF NEW YORK		
Casa nu	wah o r				
Case nu	mber				☐ Check if this is an
					amended filing
				•	
	I Form 106E/F				
Sched	dule E/F: Creditors W	ho Have Un	secured Claims		12/15
Schedule Schedule left. Attac name and	tory contracts or unexpired leases G: Executory Contracts and Unexp D: Creditors Who Have Claims Sect h the Continuation Page to this pag case number (if known).	ired Leases (Official ured by Property. If n e. If you have no info	Form 106G). Do not include nore space is needed, copy	any creditors with partially secured the Part you need, fill it out, number	claims that are listed in the entries in the boxes on the
Part 1:	List All of Your PRIORITY Un		•		
_	ny creditors have priority unsecured	a ciaims against you	ſ		
	o. Go to Part 2.				
	es.				
□ N ■ Y 4. List a	ny creditors have nonpriority unsection. You have nothing to report in this pages.  all of your nonpriority unsecured claused claim, list the creditor separately	art. Submit this form to	o the court with your other scho	holds each claim. If a creditor has n	
	one creditor holds a particular claim, li				
					Total claim
	Barclays Bank Delaware	Last	4 digits of account number	1532	\$7,363.00
	Nonpriority Creditor's Name Attn: Bankruptcy 125 South West St Wilmington, DE 19801	Wher	n was the debt incurred?	Opened 12/21 Last Active 10/09/23	·
	Number Street City State Zip Code Who incurred the debt? Check one.	As of	the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	□ Co	ontingent		
	Debtor 2 only	□ Uı	nliquidated		
	Debtor 1 and Debtor 2 only	<b>■</b> Di	sputed		
	At least one of the debtors and and	_	of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a comm	По	udent loans		
	debt Is the claim subject to offset?		bligations arising out of a sepa t as priority claims	ration agreement or divorce that you o	did not
	■ No	De	ebts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	<b>■</b> 0:	ther. Specify Credit Card	<u> </u>	
					<del></del>

10/31/23 2:16PM Case number (if known) Debtor 1 Marcia Grostein 4.2 \$1,852.00 **Barclays Bank Delaware** Last 4 digits of account number 5665 Nonpriority Creditor's Name Attn: Bankruptcy Opened 03/18 Last Active 125 South West St When was the debt incurred? 10/23 Wilmington, DE 19801 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 **Barneys Ny** Last 4 digits of account number 5551 \$0.00 Nonpriority Creditor's Name Opened 11/08 Last Active Po Box 326 When was the debt incurred? 04/13 Lyndhurst, NJ 07071 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans  $\hfill\square$  Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

Capital One / Bergdo	Last 4 digits of account number	8774
Nonpriority Creditor's Name		Onemad 00/02 Leat Active
Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 09/82 Last Active 9/21/23
Salt Lake City, UT 84130	when was the debt incurred?	9/21/23
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	■ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts
□Yes	Other Specify Charge Acc	count

4.4

\$687.00

Debtor 1 Marcia Grostein Case number (if known)

4.5	Chase Card Services	Last 4 digits of account number	8796	\$1,140.00
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 12/08 Last Active 10/23	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other. Specify Credit Card	I	
4.6	Chase Card Services	Last 4 digits of account number	5083	\$337.00
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. 15298	When was the debt incurred?	Opened 10/06 Last Active 10/21/23	
	Wilmington, DE 19850  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other. Specify Credit Card	<u> </u>	
4.7	Comenitycb/Barneys	Last 4 digits of account number	7569	\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 11/08 Last Active 08/20	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Charge Acc	count	

10/31/23 2:16PM Case number (if known) Debtor 1 Marcia Grostein 4.8 **Dsnb Bloomingdales** Last 4 digits of account number 7323 \$646.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 01/06 Last Active Po Box 8053 When was the debt incurred? 10/26/23 Mason, OH 45040 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes 4.9 Goldman Sachs Bank USA Last 4 digits of account number 7436 \$8,366.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 11/22 Last Active Po Box 70379 When was the debt incurred? 9/28/23 Philadelphia, PA 19176 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only

— Bobton i only	· ·	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did no
No	Debts to pension or profit-sharin	g plans, and other similar debts
Yes	■ Other. Specify Credit Card	l
Lendclub Bnk	Last 4 digits of account number	5508
Nonpriority Creditor's Name	_	
Attn: Bankruptcy		Opened 06/18 Last Active
595 Market Street, Suite 200 San Francisco, CA 94105	When was the debt incurred?	12/25/21
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did no
■ No	Debts to pension or profit-sharin	g plans, and other similar debts
☐ Yes	Other. Specify Unsecured	

\$0.00

Syncb/Care Credit	Last 4 digits of account number	9304	\$0.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965061	When was the debt incurred?	Opened 05/07 Last Active	
Orlando, FL 32896	When was the debt incurred:	01700	
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a separation agreement or divorce that you did not		
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify		

### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	<b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 20,391.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 20,391.00

# **United States Bankruptcy Court** Southern District of New York

In r	e Marcia Grostein		Case No.		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMP	PENSATION OF ATTORN	NEY FOR DE	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contemplation	filing of the petition in bankruptcy, or	agreed to be paid	to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	9,500.00	
	Prior to the filing of this statement I have receiv	ed	\$	9,500.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed co	ompensation with any other person un	less they are meml	bers and associates of my law firm	
	☐ I have agreed to share the above-disclosed composition copy of the agreement, together with a list of the				
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	<ul> <li>a. Analysis of the debtor's financial situation, and reb. Preparation and filing of any petition, schedules, c. Representation of the debtor at the meeting of cred. [Other provisions as needed]         Negotiations with secured creditors to reaffirmation agreements and applications of liens on     </li> </ul>	statement of affairs and plan which meditors and confirmation hearing, and to reduce to market value; exemptions as needed; preparation at	ay be required; any adjourned hear ption planning;	rings thereof;	
6.	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any any other adversary proceeding.			es, relief from stay actions or	
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of bankruptcy proceeding.	any agreement or arrangement for pa	yment to me for re	epresentation of the debtor(s) in	
	October 31, 2023	/s/ Linda Tirelli			
_	Date	Linda Tirelli Esq			
		Signature of Attorney Tirelli Law Group, L	LC		
		50 Main Street	0		
		Suite 1265	ene		
		White Plains, NY 10 914-732-3222 Fax:			
		LTirelli@tirellilawgr			
		Name of law firm			

# **United States Bankruptcy Court** Southern District of New York

In re	Marcia Grostein	D.L. ()	Case No.	40
		Debtor(s)	Chapter	13
	VEDII	FICATION OF CREDITOR N	MATDIY	
The abo	ove-named Debtor hereby verifies the	at the attached list of creditors is true and co	orrect to the best	of his/her knowledge.
Date:	October 31, 2023	/s/ Marcia Grostein		
		Marcia Grostein		
		Signature of Debtor		

BARCLAYS BANK DELAWARE ATTN: BANKRUPTCY 125 SOUTH WEST ST WILMINGTON, DE 19801

BARNEYS NY PO BOX 326 LYNDHURST, NJ 07071

CAPITAL ONE / BERGDO ATTN: BANKRUPTCY PO BOX 30285 SALT LAKE CITY, UT 84130

CHASE CARD SERVICES ATTN: BANKRUPTCY P.O. 15298 WILMINGTON, DE 19850

COMENITYCB/BARNEYS ATTN: BANKRUPTCY PO BOX 182125 COLUMBUS, OH 43218

DSNB BLOOMINGDALES ATTN: BANKRUPTCY PO BOX 8053 MASON, OH 45040

EMIGRANT MORTGAGE CO 7 WESTCHESTER PLAZA ELMSFORD, NY 10523

GOLDMAN SACHS BANK USA ATTN: BANKRUPTCY PO BOX 70379 PHILADELPHIA, PA 19176

LENDCLUB BNK ATTN: BANKRUPTCY 595 MARKET STREET, SUITE 200 SAN FRANCISCO, CA 94105 SYNCB/CARE CREDIT ATTN: BANKRUPTCY PO BOX 965061 ORLANDO, FL 32896

TERENZI & CONFUSIONE, P.C. 401 FRANKLINE AVENUE, STE. 304 GARDEN CITY, NY 11530